

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	PS		10/27
Q.I.P.E. CLASSIFIER	TC	CS	10/28/95
FORMALITY REVIEW		654177	11-4-95

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 ± ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	4/12/26/7
2	10/15/1/29
3	10/20/01/02
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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